

## PART B - FEE(S) TRANSMITTAL

Complete and mail this form, together with applicable fee(s), to:

**Box ISSUE FEE**  
**Assistant Commissioner for Patents**  
**Washington, D.C. 20231**

**MAILING INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

020455 7590 03/21/2002

**LATHROP & CLARK LLP**  
**740 REGENT STREET SUITE 400**  
**P.O. BOX 1507**  
**MADISON, WI 537011507**

Note: The certificate of mailing below can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

## Certificate of Mailing

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

David R.J. Stiennon	(Depositor's name)
<i>David R.J. Stiennon</i>	(Signature)
April 18, 2002	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/981,640	10/17/2001	Scott J. Rose	FOODSYS-6	7022

TITLE OF INVENTION: CONVEYORIZED CHEESE BRINING APPARATUS

TOTAL CLAIMS	APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
27	nonprovisional	YES	\$640	\$300	\$940	06/21/2002

EXAMINER	ART UNIT	CLASS-SUBCLASS
SIMONE, TIMOTHY F	1761	099-455000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Lathrop & Clark LLP

2 \_\_\_\_\_

3 \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Food Process Systems, Inc.

Lodi, Wisconsin

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

## 4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee
- ☒ Advance Order - # of Copies 10

## 4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 15-0660 (enclose an extra copy of this form).

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) *David R.J. Stiennon* (Date) 4/18/02  
 Reg. No. 33212

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Under the Paperwork  
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04/30/2002	00000342	1	242	\$640.00	04/29/2002	CK
04/30/2002	00000343	1	561	\$30.00	04/29/2002	CK
04/30/2002	00000344	1	195	\$300.00	04/29/2002	CK

TRANSMIT THIS FORM WITH FEE(S)

In the United States Patent and Trademark Office  
Applicant Docket Number Date Mailed  
Rose et al. FOODSYS-6 April 18, 2002

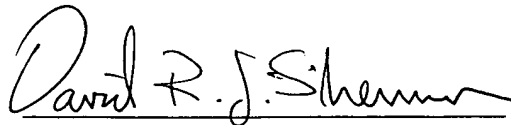
For: **Conveyorized Cheese Brining Apparatus**

Application No.: 09/981,640

Honorable Commissioner of Patents and Trademarks:

**Please acknowledge receipt of the following:**

- Check for \$ **970.00**
- Transmittal letter PTO-SB/21 (1 p)
- Form PTOL-85B Fee Transmittal (1 p) (2 copies)



David R.J. Stiennon, Reg. No. 33212

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**LATHROP & CLARK LLP**

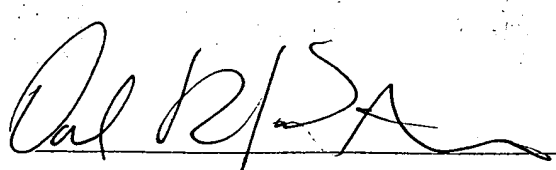
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<b>LATHROP &amp; CLARK LLP</b>	740 REGENT ST., SUITE 400 MADISON, WI 53715	<b>ASSOCIATED BANK</b> WISCONSIN 78-57-759	<b>100591</b>
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⑈ 100591 ⑈ ⑆ 075900575 ⑆ 2195 311 196 ⑈			

**TRANSMITTAL  
FORM***(To be used for all correspondence after initial filing)*

Application Number	09/981,640
Filing Date	October 17, 2001
First Named Inventor	Scott J. Rose
Group Art Unit	3721
Examiner Name	
Attorney Docket Number	FOODSYS-6

Total Number of Pages in This Submission

☐ Fee Transmittal Form☒ Fee Attached☐ Amendment / Response☐ After Final☐ Affidavits/declaration(s)☐ Extension of Time Request☐ Express Abandonment Request☐ Information Disclosure Statement☐ Certified Copy of Priority Document(s)☐ Response to Missing Parts/  
Incomplete Application☐ Response to Missing Parts  
Under 37 CFR 1.52 or 1.53☐ Assignment Papers  
(For an Application)☐ Drawing(s)☐ Licensing-related Papers☐ Petition Routing Slip (PTO/SB/69)  
And Accompanying Petition☐ To Convert a Provisional Application☐ Power of Attorney, Revocation  
Change of Correspondence Address☐ Terminal Disclaimer☐ Small Entity Statement☐ Request for Refund☐ After Allowance Communication To Group☐ Appeal Communication to Board Of Appeals and Interferences☐ Appeal Communication to Group  
(Appeal Notice, Brief, Reply Brief)☐ Proprietary Information☐ Status Letter☒ Additional Enclosure(s)  
(Please identify below):

• PTOL-85B Fee Form

Remarks

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Individual name David R.J. Stiennon, Reg. No. 33212

Signature *David R.J. Stiennon*

Date April 18, 2002

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

April 18, 2002

Typed or printed name David R.J. Stiennon, Reg. No. 33212

Signature *David R.J. Stiennon* Date April 18, 2002

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